

FSA-669A (03-24-10) Page 2

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U.S. DEPARTMENT OF AGRICULTURE  
Farm Service Agency

Farm Approved - OMB No. 0560-0229

NOMINATION FORM FOR COUNTY FSA COMMITTEE ELECTION

1. NAME OF NOMINEE (Type or Print Nominee's Full Name)

4. INITIALS OF EMPLOYEE RECEIVING FORM AND DATE RECEIVED

2. ADDRESS OF NOMINEE

5. COUNTY  
Ferry and Okanogan

6. LAA  
LAA #1 and LAA #2

7. STATE  
WA

3. NOMINEE'S CERTIFICATION:  
*I hereby agree to have my name placed on the ballot, that I will serve if elected, and if there is a conflict of interest, I will resign such position.*  
☐ I DO want to witness the settling of tied votes with another nominee.  
☐ I DO NOT want to witness the settling of tied votes with another nominee.

8. NOMINATOR'S CERTIFICATION:  
*If this nomination is by other than self, the following eligible voter or representative of a community based organization hereby nominates the above-named person to be a candidate in the next County FSA Committee election for the county.*

3A. SIGNATURE OF NOMINEE

3B. DATE

8A. SIGNATURE OF NOMINATOR

8B. DATE

☐ Check here if nominee is a write-in candidate.

9. TO BE COMPLETED BY NOMINEE  
**VOLUNTARY INFORMATION FOR MONITORING PURPOSES:** The following information is requested by the Federal Government in order to monitor FSA's compliance with federal laws prohibiting discrimination against program participants on the basis of race, color, national origin, religion, sex, marital status, handicapped condition, or age. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your nomination or to discriminate against you in any way.

ETHNICITY  
☐ Hispanic or Latino  
☐ Not Hispanic or Latino

RACE (Choose as many boxes as applicable)  
☐ American Indian or Alaska Native  
☐ Asian  
☐ White  
☐ Black or African-American  
☐ Native Hawaiian or Other Pacific Islander

SEX  
☐ Male  
☐ Female

Complete the form as follows:

INSTRUCTIONS FOR COMPLETING THIS FORM

ITEM 1 Type or Print the nominee's full name. The nominee must be:  
A. Eligible to vote in the designated County FSA Committee election.  
B. Eligible to hold the office of County FSA Committee member.  
C. Willing to serve if elected.

ITEM 2 Enter the nominee's current address.

ITEM 3 The nominee must check one of the boxes to indicate a preference regarding the settling of tied votes.

ITEMS 3A & 3B The nominee must sign and date.

ITEMS 8A & 8B The nominator must sign and date. (If the individual is self nominating, no signature is required.)

ITEM 9 Completing this item is voluntary.

NOTE:  
The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a - as amended). The authority for requesting the information identified on this form is the Food, Conservation, and Energy Act of 2008 (P.L. 110-246). The information will be used to obtain nominations for election to the County FSA Committee. The information collected on this form may be disclosed to other Federal, State, Local government agencies, Tribal agencies, and non-governmental entities that have been authorized access to the information by statute or regulation and/or as described in applicable Executive Orders identified in the System of Records Notice for County Personnel Records, USDA/FSA-6. Providing the requested information is voluntary. However, failure to furnish the requested information will result in a determination of ineligibility for nomination for election to the County FSA Committee.  
According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0560-0229. The time required to complete this information collection is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The provision of appropriate criminal and civil fraud, privacy, and other statutes may be applicable to the information provided. RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.

ALL FORMS MUST BE RECEIVED IN THE COUNTY OFFICE OR POSTMARKED BY AUGUST 2, 2010.

May 2010

Dear Producer:

You are encouraged to nominate yourself or someone else to represent your interests on the Farm Service Agency County Committee. FSA county committees are a unique arrangement that allow local guidance for federal farm programs. These committees are a direct link between the farm community and the U.S. Department of Agriculture. Committee members are a critical component of ensuring FSA agricultural programs serve the needs of local producers. Committee members are compensated for their time and travel related to county committee duties.

The duties of county FSA committee members include:

- Monitoring changes in farm programs and assisting with delivery of FSA farm programs at the local level.
- Informing farmers of the purpose and provisions of FSA programs.
- Participating in county meetings and hearing producer appeals at the local county level.
- Notifying the State FSA Committee of LAA conditions.
- Performing other duties as assigned by the State FSA Committee.

This year, nominations are for committee members to represent producers in Ferry County and Okanogan County. Please feel free to call the County Office for a more detailed description or a copy of the LAA map.

**Ferry – LAA #1**  
The Local Administrative Area (LAA) #1 in Ferry County is located in the northern portion of the county encompassing lands lying within Townships 38 and 40.

**Okanogan – LAA #1**  
LAA #1 in Okanogan County involves lands lying within the Colville Indian Reservation and portions of Omak and Okanogan lying west of the Okanogan River.

To hold office as a county committee member, a person must meet the basic eligibility requirements described below:

- Actively participate in the operation of a farm or ranch.
- Be eligible to vote in a county committee election. (Be of legal voting age and have an interest in a farm or ranch; not of legal voting age but supervises and conducts farming operations on an entire farm; participates in any FSA program.)
- Reside in the LAA in which the person is a candidate.

The nomination form FSA-669A allows individuals to nominate themselves or any other person as a candidate. Each form submitted must be limited to one nominee and signed and dated by the nominee (Item 3A) to indicate a willingness to have their name placed on the ballot and agree to serve if elected. Item 8A reflects the nominator's signature and date. For detailed instructions on completing the nomination form or requesting a form, please contact your local county FSA office, or refer to the website <http://www.fsa.usda.gov/wa>.

The deadline for nominations is **August 2, 2010**. Completed nomination forms are to be submitted to the county FSA address listed at the top of this letter and should be returned, delivered, or postmarked no later than August 2, 2010.

Sincerely,  
/s / Gary Brenier  
County Executive Director

“The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, genetic information, political beliefs, reprisal, or because all or part of an individual’s income is derived from any public assistance program. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotapes, etc.) should contact USDA’s TARGET Center at (202) 720-2600 (voice and TDD). To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, or call (800) 795-3272 (voice) or (202) 720-6382 (TDD). USDA is an equal opportunity provider and employer.”



May 2010

## FERRY AND OKANOGAN FSA NEWS

### Ferry County FSA

P.O. Box 323  
84 E. Delaware  
Republic, WA 99166-0323  
Phone: (509) 775-3390  
Fax: (509) 775-3170

### Okanogan County FSA

1251 2<sup>nd</sup> Ave. S. Rm 103  
Okanogan, WA 98840-9723  
Phone: (509) 422-3292  
Fax: (509) 422-0532

### Office Hours

Monday – Friday  
8:00 AM – 4:30 PM

### Ferry County Committee

Kathleen Olson, Chair  
Bill Floyd, Vice-Chair  
Jerry Larson, Member  
Luanne Finley, Advisor

### Okanogan County Committee

Jeff Delfeld, Chair  
Mark Timmerman, Vice-Chair  
Stan Stout, Member  
Jade Gabriel, Advisor  
Victor Castro, Advisor

### Office Staff

Gary Breiler, CED  
Stu Skidmore, FLM  
Jose Limon, FLO  
Sandy Hinger, FLT  
Cliffene Coyne, PT  
Virginia Lane, PT

### Important Dates to Remember

#### May 31

Memorial Day office closure

#### June 1

DCP/ACRE signup ends

#### June 30

Crop reporting deadline

#### July 15

ACRE production report  
deadline



### DCP/ACRE Update

Producers operating farms with crop acreage bases established under the Direct and Counter-cyclical Payment Program (DCP) and Average Crop Revenue (ACRE) may signup for the 2010 program at this time. The signup period ends on **June 1, 2010**, for enrolling farms in the 2010 DCP and ACRE programs. Late-filed applications cannot be accepted. Please contact the FSA office to make an appointment.

ACRE participants for 2009 must turn in yields for 2009 and previous years by **July 15, 2010**.

### Grassland Reserve Program Signup

Okanogan County FSA office will be conducting a Grassland Reserve Program (GRP) signup through May 31, 2010. GRP provides rental payments on grazing land while you continue to graze. GRP contracts are 10, 15 or 20-year contracts and prohibit conversion to non-grazing uses like cropland or development. Rental payments are \$8.75/acre/year. Grazing must be conducted according to a grazing management plan. Enrollment is through a competitive ranking process and is limited to 320 acres. Contact our office before May 31 to complete a GRP application.

### Acreage Reporting Deadline

The acreage reporting deadline for most programs is **June 30, 2010**. Filing an accurate acreage report for all crops and land uses, including failed acreage and prevented planting acreage, can prevent the loss of benefits for a variety of programs.

Failed acreage must be reported within 15 days of the disaster event and before disposition of the crop. Prevented

planting must be reported no later than 15 days after the final planting date.

Acreage reports are required for many FSA programs. For crops other than NAP (Noninsured Crop Disaster Assistance Program) crops, acreage reports are to be certified by the **June 30, 2010**.

Acreage reports on crops for which NAP assistance may be paid are due in the county office by the earliest of these two options: 1) June 30, 2010, or 2) 15 calendar days before the onset of harvest or grazing of the specific crop acreage being reported.

### SURE Signup Continues

FSA continues to accept applications for the Supplemental Revenue Assistance Payments Program (SURE). SURE provides benefits for farm revenue losses due to natural disasters that occurred in the crop years 2008 through September 30, 2011. To be eligible for SURE payments, producers are required to obtain crop insurance on all crops in all counties or, for crops for which insurance is not available, producers must participate in the Non-Insured Crop Disaster Assistance Program (NAP) except for grazed acreage. Coverage is not required for economically insignificant crops.

Socially Disadvantaged, Limited Resource, and beginning farmers or ranchers are exempt from the risk management purchase requirement.

### Vacancy Announcement

FSA has 2 vacancies for paid interns in a two-year training program. Upon successful completion, the interns will be eligible for farm loan officer positions in Yakima and Ephrata. The position closes May 17, 2010. For more information, see the FSA website <http://www.fsa.usda.gov/wa> or contact Administrative Officer Jonna Provinsal 509-323-3007.